#### FOR INSTRUCTIONS, SEE BACK OF FORM

### DISCLOSURE SUMMARY PAGE

File with: lowa Ethics and Campaign Disclosure Board 510 E. 12<sup>th</sup>, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed electronically.

Effective May 1, 2010, all statements and reports for State PACs and State Parties must be filed electronically.

IA ETHICS AND CAMPAIGN DISCLOSURE BO

2012 OCT 22 AM 9: 23

COMMITTEE NAME (Must be same as on Statement of Or	ganization)	STREETING TO THE TOTAL THE TOTAL TO THE TOTAL THE TOTAL TO THE TOTAL THE TOTAL TO T
15 . 6	5	FORM
IMPORTANT: Indicate by # type of committee you are reporting for		DD 2
		(Rev. 12/2009) REPORT
(4) County Central Committee (5) County Candidate (6) City Can Subdivision Candidate (8) County PAC (9) City PAC (10) School 11) Local Ballot Issue	adidate (7) School Board or Other Political	
	of Board of Other Political Subdivision PAC	
CANDIDATE COMMITTEES ONLY:		Comm. # 1900
Candidate Name	Political Party (if applicable)	Logged In
STAN STOOPS	LEDUBLICAN	Scanned
Office Sought	District (if Senate or House)	ComputerAudited
BOARD of SUPERVISORS		1 1
Late reports are subject to possible civil and aring all	ursuant to Iowa Code sections 68B.32A(7	and 68A,401(3), the candidate for a
candidate's committee, and the chairperson, for any other type of	committee, is the individual responsible for	or filing timely and accurate reports.
DAIL ST		
SIGNATURE OF PERSON FILING REPORT	319 458 9045	10 19 17
SIGNATURE OF PERSON FILING REPORT	TELEPHONE	DATE SIGNED
I AM FILING A		
	REPORT FOR (1) ELECTION /(2)	2)NON-ELECTION YEAR.
(report date)	Indicate by #	2
OCHECK IF AMENDMENT TO REPORT DATED	19 12	cal Committee
		cal Committees, enter Date of Election
Check if this is final (termination) report and attach Notice (You must continue to file reports until a DR-3 is filed	of Dissolution Form DR-3.	unty & Local Committees, enter County in
a price of the control of mot	wh	igh Election is held
	I .	1111
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STATEMENT OF CASH ON HAN	D	DASHINGTON
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CASH ON HAND at the beginning of the reporting period. (To committee. This amount MUST be the same as the of the last reporting period or must be zero if this is fi	Dotal of all funds held by the	DASHINGTON 86
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# For Instructions, See Back of Form CONTRIBUTIONS -- MONEY TAKEN IN (Including candidate's personal funds) COMMITTEE NAME (Must be same as on Statement of Organization) Reset Form A (Rev. 07.03) CHECK THIS BOX IF AMENDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

STAN STOOPS for

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE	PAC ID NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	DELATION CUID	AMOUNT	
RECEIVED (MM/DD/YR)	(if applicable) AND PAC CHECK NUMBER	The state of Contributor	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
7/31/12	CK# CASH	KATHRYN STOOBS WAYLAND, LOWA	MOTHER	\$ 100.	
8/21/12	OA514 CK#	RICK MARLAR	NONE	450.	
8/20/12	CK# R	MARCUS FEDLER	NONE	100.	
9/1/12	CK# CASI+	MARGE KERR	Aust	\$ 100-	
10/2/12	ID# CK# ~	ALICE ROSEN	NONE	A/50.00	
10/5/12	CK# -	EMERY GWOERICH	NONE	2500.	
10/8/12	ID# @As# CK#	HAL COLLIVER 1720 230 TH STREET, NEOTA, IA	NONE	¥50.50	
10/8/12	CK# ~	1720 230 TH STREET, REOTA, IA DAVE & TAMMY SCHWEITZER 1445 W. 18TH ST. WASHINGTON, LOWA	Non E	\$100,00	
	CK#				
	ID#				
	CK#				
			SUB-TOTAL	*3/50°	

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page \_\_\_\_\_ of \_\_\_\_ (for Schedule A)

TOTAL (if last page of this schedule)

-	_
Reset	Form

### EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE <b>B</b> (Rev. 07/03)	MONETARY EXPENDITURES
OI CHEC	CK THIS BOX IF

AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
7/3/12	CK#/602	CUSTOM IMPRESSIONS INC	RETURN OF CAMPAIAN CONTRIBUTION	\$ 100.00
131/12	CK#	JOURNAL EVENING	CAMPAIAN Ads	#30.68
10/3/12	ID# CK#	CUSTOM IMPRESSIONS INC.	DECALS FOR OLD CAMPAIGN SIGNS	\$ 162. 64
10/12/12	ID# CK#	WASHINGTON EVENING	CAMPAIAN Ads	531.84
	ID# CK#			
	CK#			
	CK#			
	ID# CK#			
			SUB-TOTAL	\$ \$25-16

### THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

Page	 of	

TOTAL (if last page of this schedule)

FOR INSTRUCTIONS, SEE BACK OF FORM		•
COMMITTEE NAME (Must be same as on Statement of Organization)  STAN STOOPS FOR BOS	SCHEDULE F (Rev. 02/08)	LOANS RECEIVED & REPAID
NOTE: This schedule reports money loaned to the committee which is deposited in the committee account.  TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$	P CHECK T AMENDIN	HIS BOX IF G FORM
PART I - MONETARY LOANS RECEIVED THIS REPORTING PERIOD  (Original source of loan, such as a bank, must be shown if a third party is involved. Include loans from candid	late's personal fu	nds.)

RE	DATE CEIVED MDD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable*)	AMOUNT OF LOAN
DE	1/8/	FREE COUNTY	Support	\$45.60.00 AMMENODED
		(/N NIIVD)		AMMEN OND

TOTAL (PART I)

\$ 560 00

## PART II - MONETARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD (Loans forgiven must be reported on Schedule E - In-kind Contributions.)

DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE* (If Applicable)	AMOUNT REPAID
			\$

TOTAL CASH REPAYMENTS (PART II)	\$
From Schedule E TOTAL LOANS FORGIVEN	\$
TOTAL OUTSTANDING LOANS END OF REPORT PERIOD	\$

\*Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column when it applies.

of\_ (for Schedule F)